Printed Name

## A CONTRACT OF THE PROPERTY OF

Signature of preparer (if other than taxpayer)

## **NELSON COUNTY FISCAL COURT**

OCCUPATIONAL LICENSE DIVISION

www.nelsoncountyky.com
PO Box 578
1 Court Square, Suite 202
Bardstown KY 40004
(502) 348-1895
(502) 348-1897 fax

## OCCUPATIONAL LICENSE FEE - INFORMATION RETURN S-Corporation, Partnership, LLC, LLP or similar

## \*\*Information Return Only -- Tax Assessed at the Individual Level

C-Corporations and Individuals - do not use. Please file Form C-1 or I-1

		Check all that apply:		
		Address Change?		
		Change in Ownership?		
		Contract labor paid this year? (attach 1099's)	$\vdash$	
		Employees in Nelson County? Final return?	$\vdash$	
		Fillarictum		
Principal Business Activity				
Daytime Phone Number				
Federal ID Number				
REQUIRED: The following information is Attach additional sheets if necessary:	s required of all shareholders, partner	s, members, etc during the tax year.		
Name	Address	K-1 Attached?		
	<del></del>	<del></del>		
		( <del></del> )		
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	F			
		<del></del>		
**Each filing entity MUST include copies	s of all applicable tax documents filed	with the Internal Revenue Service.		
S Corporations: Form 1120S pages 1-5,	, K-1, 1099-Misc; Partnerships: Form	1065 pages 1-5, K-1, 1099-Misc.		
I declare, under the penalties of perjury, that this is a true and accurate return.	at I have examined this document and to	the best of my knoweledge and belief,		
Signature of Corporate Officer	Printed Name	Title	Date	

Date